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W. E. H.

Acute Rheumatism

by

Joseph T. Shaw

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Maryland

January - A. 1827

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Acute Rheumatism.

Though not ranked among the opprobria medicorum, there are perhaps few diseases, to which the human system is liable that more frequently arouse the feelings of the compassionate Physician and cause him ^{to} experience and regret the imperfection of the healing art; than the one now under consideration. Though life be seldom in danger, yet long continued and agonizing pains, sometimes makes even death not undesirable. Unlike Gout which generally attacks the luxurious and indolent and higher class of society, Rheumatism, as if no condition in life should exempt from its troubles, selects for the most part the labouring class, those whose occupations subjects them to exposure to its exciting causes, and ^{to} whose own & whose ^{own} support demands their personal exertions, inflicting on them little less than the pangs of Inquisitional torture. Witnessing some unhappy cases of this description induced me to investigate as far as my limited means would permit, the nature and treatment of this disease as detailed

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by the best writers, within my reach, who have treated on
the subject; the result of this investigation, and my own
experience, will be comprised in the following dis-
tinction. Confounded with arthritis, this disease has not been
distinctly or separately treated of by any of the ancient
physicians. 'tis true the word *"rheumaticus"* is used by Galen
but so vaguely that we are left in doubt whether he meant
the disease at present known by that name - To Ballonius
owe the first accurate description of it: and his treat-
ment has been followed in some of its most prominent fea-
tures, by the best practitioners to the present day.

Cullen has defined Rheumatism; "a disease from an ex-
ternal and often an evident cause, pyrexia, pain about
the joints, following the course of the muscles, fixing up
the knees & larger joints, in preference to those of the feet
& hands, increased by external heat." Dr Ferriarone has de-
scribed it as. "A peculiar species of inflammation, af-
fecting the parts which have a fibrous texture, and most
frequently the synovial membranes, producing much
sympathetic irritation in the constitution and fever of
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the inflammatory type," Dr Good in his valuable work on the sanguineo function defines acute rheumatism as "pain inflammation and fullness usually about the larger joints and surrounding muscles, often wandering, urine depositing a labitious sediment, fever & cauma."

By comparing the above ^{idea} mentioned definitions and numerous others which might be collected, if the nature of the subject required, we shall find ^{it} similarity so striking as to point the reason as ~~one~~ of a specific nature, and bearing its own peculiarities so strongly impressed as to surprise us that it should so long have remained undistinguished from its kindred affections, -

Nosologists have generally divided Rheumatism into Acute & Chronic for which the terms *tonic* and *Alonic* or sub acute have been latterly proposed as more expressive, yet as the former are more generally known & better understood, I see no necessity to change them, and shall therefore retain them in this way -

Acute Rheumatism is ushered in with the ordinary symptoms of pyrexia, preceded or succeeded by pain in
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the large joints, most frequently the hip, knee, shoulder
thou rarely, [&] fingers & toes. Though sometimes attack-
ing muscular parts, the ligaments, tendons aponeuroses
and fibrous textures of the body seem to be the legitimate seat
of the disease; The Fever has exacerbations in the evening
the patient is rest less & vigilant, and complains of increas-
ed pain at night; from the heat of the bed & covering, the urine
sometimes pale in the commencement, though generally high
coloured depending after the disease has continued for sometime
a catenitious sediment. the bowels are mostly costive.

The Sympathetic fever is speedily established, attended with
a hot dry skin, a full hard & frequent pulse; the blood if
examined has a coriaceous appearance, the tongue covered
with a whitish viscid fur, and the complexion of a pallor
here, frequently an irregular perspiration breaks out - un-
accompanied by any obviously beneficial effects -

There is no disease probably in which metastasis is more
frequent than in this, I have seen a case where the pain
would pass almost instantaneously from the knee to the an-
kle, on to the knee of the opposite side, to the shoulder, hand

*The integuments not infrequently feel the effect of metastasis

metastasis
life and various other parts of the body - Sometimes, in the
language of Dr Good, it darts internally upon organs we
should little suspect as the diaphragm and the pleura, and I
have occasionally known the stomach as suddenly and as
severely affected as in gout; it is also said at times to pitch
upon the heart & the intestinal canal, and to produce ex
cruciating torture in both these organs; these changes
are most apt to take place at night. From its propensity
to Metastasis, and frequently attacking two similar parts
at the same time Dr Darwin was led to consider Rheuma
tism as not a primary disease, but the consequence of the
evacuation of morbid matter action from one part of the
system to another. Whatever part it attacks it renders
and a very perceptible increase of heat in the part
more to the touch, inflamed, red, and swollen, a ply termed
by a gentleman who has experienced the utmost tortures it
could inflict. "The Rheumatic fire" - The muscles are af
fected with spasmodic twitches I have seen the
limb start of itself from the pillow it reposed on
causing the patient the most excruciating pain.
Persons labouring under acute rheumatism compare the pain
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they suffer to what they suppose would arise from an
anxiety gnawing the parts a burning, throbbing & pricking
sensation is also experienced. - "the anxious expression
of the patient's countenance under a fit of Rheumatism
marks the severity of the disease." The countenance is also
pale & flushed alternately and the skin of the face relax-
ed, for the most part covered with a greasy kind of mois-
ture. - The affected joint is more or less conformed and when
perfectly at rest is sometimes easy, the least motion gives
pain. - The disease sometimes goes off without any obser-
vable crisis, at others it disappears with a calculous depos-
it in the urine, or by a gentle diarrhoea, or a general
diaphoresis or haemorrhage from some venular part.
It has been remarked, and my own knowledge in one case
bears testimony to the truth of it, that when the knee or hip
is the seat of Rheumatism the genital organs of that side
are affected. ~~with a purulent exudation~~ -

Causes

Rheumatism, is a disease of the Spring and autumn, sel-
dom occurring in Summer & comparatively rare in winter
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the temperature be uniformly cold; but in this climate, where the weather in winter is remarkably variable I would say the disease occurs as often or oftener than in the fall or spring. The cause is usually attributed to the vicissitudes of the weather from heat to cold or vice versa, cold applied to the body when in a warm perspiration; the long continued application of cold with moisture, as wearing wet clothes & sleeping in damp sheets. Standing on the cold wet ground with the feet soaked & shoes on; sleeping partially covered exposed to a current of air; too early change of winter clothing, especially the flannel - for the drop of summer; exposure while under the influence of Mercury; habits of excessive drinking & state of the digestive organs by inducing debility render the body liable to be affected; Sprains, luxations, and what we weaken the structure of the joints; a previous attack of the disease and according to H. C. Witheringham, as cited by J. G. Good, amputation predisposes to it. That Rheumatism is frequently an hereditary disease, I believe is almost universally admitted - both sexes are equally obnoxious to it. The middle aged more than the young or old are exposed to it, attacks

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but it is by no means confined to them: The above enumerated
are the chief predisposing & exciting causes of Rheumatism.
The proximate cause involving that of inflammation seems
still to be a vexata quaestio among pathologists; indeed the
proximate causes of diseases generally, have baffled the inge-
nuity of theorists from the earliest times and they appear
now to have arrived not much nearer the truth than the
poet who describing their escape from Pandora's box
observes, "Vixit Diabolumque ipse quaeque inest vixit."

ΑΥΡΟΥΑΤΟΙ ΠΟΙΤΩΣ, ΚΑΚΑ ΣΥΜΠΤΩΣΙΝ ΓΕΓΡΩΤΑΙ

ΟΥΔΕ, ΕΝΩΙ ΓΟΥΝ ΕΓΧΕΙΡΟ ΥΠΕΡΤΑ ΖΕΥΣ

gnosis. The only diseases which we are in any danger of mistaking for
gout, are Gout and some of the symptoms of secondary Syphilis for
the latter frequently bear a strong resemblance to the chronic
stage, in this case the history of the patient's previous life
will afford us the surest diagnosis,

Casimirus in his valuable treatise on gout has drawn
the discriminating symptoms between it and Rheumatism
cannot do better than quote his words, "Non Rheuma
tism the gout is to be distinguished not so much by any
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one mark, as by the concurrence of several circumstances, in
the first fit of gout; it seldom happens that more than one part
is affected, and still more rarely, that more than one part is
attacked at the same moment. This solitary disposition of
gout as to its situation in the first attack, is a striking point
of discrimination; to which may be particularly added the
adult age. In ordinary examples the diagnosis is not
difficult. The remissions during the day from pain and fever
are much more distinct in acute gout than in acute Rheu-
matism: and among the local characters which are striking in
gout, the following may be selected - a serous effusion
into the cellular membrane immediately supervening the inva-
sion of a fit, into the parts usually affected by it, and which
yields a pit to the finger as the inflammation ceases, and in a
light degree, even before this, when the skin is not extremely
tense. A largeness of state of the neighbouring veins more marked
and general than in Rheumatism, sometimes appearing in
the whole limb and occasionally preceding the inflamma-
tion a day or two or even longer. The pain in Rheumatism
is more severe and gnawing. The inflamed part does not present

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Resisting glossy appearance as in gout. in Rheumatism there is
no acquaintance of the inflamed part as is sometimes the case in
gout, and it be produced by some particular application. But
the surest diagnostic is that Gout is universally proceeds from
the action of the digestive apparatus, whereas Rheumatism
does not, and may usually be traced to some improper exposure
to cold, or sudden changes of the weather.

We should also be acquainted with the patients mode of living
and the diseases of his more immediate ancestors to assist us in
making up our opinion.

From the symptoms and phenomena of Rheumatism
it may readily be perceived that it is a disease of in-
flammatory action modified by the tissue in which it
is located. The leading indication of cure will be to
reduce vascular excitement, this is most effectually
done, first, by V. Section, for this in the language of Dr
Chapman there is no substitute. It should be repeated
again & again, if the state of the system requires and
will bear it. This practice has the sanction of the best
medical authority; it was principally relied on by Bal-
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Conius who as we have said before first accurately
discriminated the disease, Sydenham also placed his
chief reliance on it; his plan was to bleed four days
successively, keep the bowels open and restrict
the patient to the lowest diet. Sir John Pringle in
his diseases of the army, observes "that the cure was
to be obtained only by repeated and almost daily bleed-
ings till the patient was without pain, "and that
frequent bleedings weaken the body less perhaps than
in almost any other disease, When the fever is violent
disseminated &c. and especially when the frame is ro-
bust, our only remedies are V.S. and diaphoretics
by the former which will often demand repetition
we take off the inflammatory diathesis,

Gullen in his treatise on this disease observes that
Bloodletting is our chief remedy here it should be
drawn in large quantities and the bleeding frequently
repeated, in proportion to the frequency fullness &
hardness of the pulse and to the violence of the pain,
for the most part large and repeated bleeding seem
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to be necessary and accordingly have been very much
employed but to this some bounds should be set for
very profuse bleedings occasion a slow recovery and
if not absolutely effectual are ready to produce a chro-
nic Rheumatism. It would be needless to cite ~~from~~ ⁱⁿ author-
ity in favour of this remedy as the concurrent testimony of
almost all practitioners agrees in placing it the head
of the curative means. The blood when drawn at the com-
mencement of an attack presents the same appearance
as that taken from the arm of one in vigorous health
but at the second bleeding it generally shows the in-
flammatory crust. We should be guided here as in
phlebotomy by the appearance of the blood drawn, by the pulse
and pain. Secondly by emetics. These have been high-
ly called by some, they prove useful not so much by
their control over the vascular system as by cleansing
the stomach when loaded with offensive matter, which is
often the case, particularly when the disease arises
in miasmatic districts and when the hepatic apparatus
is deranged causing a copious secretion of bile in these
cases

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cases emetics may be resorted to with decided advantage
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serves that it is sometimes necessary to ^{raise} ~~produce~~ ^{induce} ~~excite~~ action also.
I pass from the consideration of emetics to that of purga-
tives they have not generally received the sanction of the
profession but for my own part I should consider them
a valuable remedy. I am certain that I have seen a case
where the exhibition of an active cathartic was pro-
ductive of a cessation of pain and the suspension of ~~pain~~
an attack for two or three days. In almost all the other
inflammatory diseases the efficacy of purging is undoubted
they (i.e.) (purgatives) diminish arterial action and ac-
tuate powerfully. in treating of the practical appli-
cation of cathartics Dr. Chapman observes that as
much as in any other diseases are the genuine phleg-
masia treated by purgatives. Of the more inflammatory of this
order is acute Rheumatism and of course, these, among
other evacuations in the early stage are useful.
neglected or ill managed it will sometimes continue with
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out any considerable abatement, for months or even the
phlogistic deathosis of the arteries is here kept up, while
the strength in general is so much reduced as utterly to
rob the fullness of blood. In this state purging
also occasionally proves of great advantage. It seems
more than any other remedy, to quiet the mobility of
the arteries, and to diffuse excitement over the system
which in these cases is chiefly concentrated in the blood
vessels. Every one who has had much clinical experience
must have observed the intimate connexion which subsists
between rheumatism and the acute affections of the ab-
dominal intestinal canal, as cholera, dysentery, dysen-
tery. This latter disease has been maintained by some to
be a rheumatic state of the bowels. They frequently al-
ternate. — Nothing indeed ^{much} more common than to
see rheumatism, suspended, or even cured by dysentery.
Spontaneously induced, the course which nature points
out, I have successfully imitated in the more ob-
stinate and protracted cases of the disease. —
During the whole course of the attack from the tenden-
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ing to constipation, it will be necessary to employ medi-
cines to keep the bowels in a soluble state and procure
one or two evacuations daily, for this purpose Rhubarb
magnesia Sulphur, cream Tartar Sal de duobus are
prescribed. Sulphur from its action on the surface is consid-
ered particularly useful. When the sympathetic fever is
established and the stomach and chyliferous vessels are
disordered small doses of calomel or the blue pill worked
off by Rhubarb, or Senna, or neutral salt according
to the plan recommended by Abernethy, will be found
extremely serviceable.

The utility of Diaphoretics in Rheumatism is unun-
derstandably admitted, but to prove beneficial they should not
be exhibited till vascular excitement is sufficiently
reduced by previous depletion. It would, as a gen-
eral rule, be best to commence with the use of the milder
articles of the class. As acetate of Ammonia, neutral Salt
Sweet spirits of Nitre &c by an attentive observance of their
effects, we may conclude on the propriety of the more ef-
ficacious Dover's powders have acquired a well deserved
reputation.

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reputation in this disease, but there requires some degree of caution in their use, they are never admissible whilst any considerable febrile excitement exists, and when once begun to gain their full effects, they ^{generally} should be, in obstinate cases kept up for twenty four hours. The nitrous powder forms also a very excellent remedy. External means are sometimes resorted to, in order to procure diaphoresis, the warm bath and vapour bath are decidedly useful.

The Peruvian bark has been employed in this disease by many of the most eminent practitioners, such as Morton, Folger, &c. in George Forster, Haygarth and several others equally respectable. They have extolled the efficacy of this article in the highest strains of panegyric. Dr Hodge observes, that for the last fifteen years he had treated rheumatism exclusively with Peruvian bark, and that he had not lost more than two or three patients although he had treated several hundred patients in this way who laboured under the disease, during that time.

Haygarth has used it with still more decided success.

He commenced the treatment by giving the patient an antispasmodic enema so as thoroughly to evacuate the stomach, then
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the peruvian bark in doses of 5 or 10 or 15 grains every two or three hours gradually increasing the dose to 20 or 30 or 40 grs if it seemed to prove beneficial. but never giving more than perfectly agreed with the patient's stomach; he sometimes found it necessary to repeat the emetic and even bleed before the stomach would receive the medicine, — In concluding his remarks on the mode of treatment he observes that for many years I have been thoroughly convinced the peruvian bark has a more powerful control over Rheumatism than over any other disease and that it does not cure the ague so certainly and quickly, It also prevents those flying pains which often affect the patient when used in the ordinary way.

It is scarcely necessary to observe that the weight of medical authority & experience is decidedly against ^{the efficacy of} this method of cure. To explain the cause of this discrepancy of medical opinion about a matter of fact, is far beyond my power. Judging from the inflammatory nature of the disease and the stimulating & tonic properties of the medicine I should certainly conclude against the practice. — What would be the effect of the Sulphate of Quinine from the effect of this article in bilious fevers as ^{is lately} working

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According to the observations of Dr Holcombe recently published
I am inclined to think it would prove eminently useful—
Dr Chapman, thinks that the use of bark is best suited to the convales-
cence, To recruit strength and promote recovery. And also in
those cases arising in low & marshy districts generally of a
remittent or intermittent character ^{he says} the system is common-
ly relaxed and the medicine may be sooner resorted to.
This seems to be the best manner of using the article, It is cer-
tainly the most reasonable practice, and is corroborated by
the most numerous and best authorities—

See John Meigs in his diseases of the army observes that
the best internal remedy he had used was camphor though
not pushed so far as to excite a sweat—

Having thus briefly stated the principal general remedies I shall
next proceed to the local treatment. Whilst the pain are
waning we must principally rely on constitutional remedies
but when the disease has fixed on any particular part af-
fecting it with excruciating pain accompanied with swell-
ing lesion heat &c, local applications are of essential service
To relieve these symptoms topical blood letting by cup or leeches
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are usually resorted to, Friction with ointments as of Sulphur & camphor, volatile linaments, Camphorated linaments, poultices of bread & milk, &c. Cold applications are highly extolled by Dr Jackson of Boston, on the authority of the Russian Physicians but I believe their efficacy is not generally admitted; although there are undoubtedly some cases in which they do good. The tepid evaporating solution of Gend. is more composed of one part of Alcohol & three of the camphor mixture is according to that author worthy of the highest commendation as an auxiliary to general treatment. The effect of this application says he is truly surprising - *très-énergique*. Of the efficacy of blisters in this disease I have some slight experience, and as the case in which I saw them used is in some respects peculiar, I have thought it not improper to introduce it here. *Alonzo* has been subject to attacks of Rheumatism from his youth. The disease has gone always fastened upon his right knee. This he attributes to an injury done the joint by leaping when a boy, from a tree, and at another time straining it severely at a game of fives - His first attack happened in the year 1802. during which attack he was attended by
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J^g. Brown of Maryland who at that time was one of the most distinguished practitioners in this country, and ^{had been} physician to General Washington but the disease yielded to no particular remedy and as the patient expired it ~~spoke~~ ^{was} ~~itself~~ out. From that time he continued pretty ~~free~~ ^{well} ~~from~~ it we except a few slight attacks, till 1813, in the fall of this year he was seized with a most violent recurrence of the disease which continued throughout the succeeding winter & spring and did not finally terminate till the middle of summer, during the whole of this attack he had the best medical attention that could be procured, and tried every remedy the skill & ingenuity of his physicians could devise, on the suggestions of his friends I suggested for his relief but without effect, towards the termination of his illness he was put under the influence of mercury and a copious salivation ensued. An abscess formed in the integuments of the limb over the junction of the heads of the Gastrocnemius muscle, from which a considerable quantity of pus was discharged, with this the disease disappeared and did not return again till the winter of 1812, when it again ~~returned~~ occurred and having run precisely the same course terminated about the same time of the year
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lieve a substitute,

and in suppuration, in this case two abscesses formed one where the former occurred the other over the insertion of the Sartorius & groined tendons on the front of the thigh; In this attack the patient was treated by his brother a very respectable practitioner and graduate of this university in the same manner as he had been in the preceding one, except that a succession of blisters was employed over the affected part and the Salivation omitted. — The abscess here again proved critical and after the discharge of the matter the wound soon healed and the limb got well. He now enjoyed an exemption from the disease till the summer of the present year (1826) when from some slight exposure to cold, his system being irritable and debilitated by intense application to study and a state of great constipation thereby induced, he was again attacked most violently with all the symptoms that usually attend this disease, — James being to say that O. S. was not here resorted to in consequence of a strong prejudice the patient entertained against the employment of it, owing to its having failed in the two preceding attacks, though James inclined to believe it was not pushed sufficiently far. As a substitute for U. S. pumping was resorted to, a mercurial

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cial cathartic followed by a dose of Epsom salt, seemed to prove
of eminent service suspending the pain for a day or two
on their recurrence the purgative was repeated again & again
but it proved insufficient to expel the disease, the pain soon
fixed into its former seat, the sympathetic fever was estab-
lished and the patient prostrated. I shall not enter into a de-
tail of the treatment he resorted to he it is sufficient to observe
that he was attended by experienced Physicians - after general
expectations had been carried to considerable extent topical applications
were used such as sulphur ointment volatile liniment & poultices
but without producing any good effect at all, a supposition of blis-
ters was then resorted to, the effect of these I had an opportunity
of witnessing daily. They were for the most part applied over the
seat of pain & inflammation. The effect of the blisters at first was
unpleasant exactly considerable irritation, but not much more
than is commonly experienced from them, but soon as it had drawn
the inflammation gradually subsided and the pain ceased. The limbs
then and hands were disposed and the part became of a natural, soft
healthy feel. The remedy acting as a most copious evacuant
I was desirous to observe how the pain might be driven from one
part.

It has been much recommended and practiced with very
satisfactory results.

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part of the joint to another, when seated in the muscles & tendons immediately above the knee and behind it. The application of a blister there would completely dislodge it. It would pass them down to the parts below the joint a removal of the application there would drive the pain around to the front of the joint to the heads of the *libialis anteriores* & *posterior* ^{opposing muscles}. These parts were necessarily the seat of pain and from which it was successfully driven by the application of a blister. The patient has become quite familiar to their employment convinced of their efficacy in alleviating pain and mitigating the violence of the disease. He resorts to them when even his sufferings are severe as others do to opium in some other insomitable kinds of disease. What would be the effect of a large blister being applied both above & below the affected joint?*

It may be proper to observe that the disease has again run on to suppuration but is not yet (December 19th 1826) cured. I am fully aware that this disease seldom terminates in suppuration and many authors say it never does.

Regimen & diet. The antiphlogistic regimen should be most strictly enforced, the patient should be incommoded neither by heat or cold, but carefully guarding against any sudden variation.

[Faint, illegible handwriting in cursive script, likely bleed-through from the reverse side of the page.]

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variation of temperature, I should avoid motion as much as possible
his rest being requisite to the cure of all inflammatory affections
particularly that of the joints - and pay regard to cleanliness, his
diet should be extremely low, the light farinae &c. ripe sub
acid fruit &c. all animal food must be forbidden. Sydenham
confined one of his patients to whey alone for several days
with great advantage, the drinks should be cooling and
pleasant, all spirituous liquors must be absolutely for
bidden. I have now briefly stated the principal remedies
used in the acute form of Rheumatism and might pass on
to the consideration of the chronic and anomalous forms of
it, but as they differ considerably in the symptoms & treat
ment I find it necessary to remain silent about them, since a sepa
rate discussion would swell this dissertation to an unusu
al size. It remains now only to say a few words of the Sequela
Anaphylaxis and Conduct during convalescence.
Convalescence. When the disease has given way which may be
known by the subsidence of excitement, cessation of pain
cleansing of the tongue accompanied sometimes with a copious
abundant sediment in the urine, gentle diarrhoea, general pers
piration

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fixation and an apparent anxiety in the limb affected to extend it-
selves we must endeavour to restore tone to the system by the ad-
ministration of Peruvian bark or other tonics together with the
mineral acids, of which the colicoid has with many the greatest
share of confidence, with the use of these general remedies the limb
may a rather should be frequently rubbed, and frequent exer-
cise enjoined. Dr Gardanne observes that "The stiffness, aching
and debility of the limbs which follow the acute state of pain
and inflammation yield only to active exercise and friction.
I have often directed the patient when convalescent to overcome
his seeming inability by strenuous exertions, and to walk sev-
eral miles in the day, beginning of course with moderate attempts
the best results have followed; and when the season of the year
or the weather allows this remedial method it cannot be too short-
ly enjoined, so that particular contraindications do not forbid its
practice"

Toguelia, Chronic Rheumatism occasionally follows the acute
and sometimes the affected joint and limb are rendered quite
useless, the whole articular apparatus being irretrievably
destroyed. The disease sometimes produces an effusion of a trans-
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pusant gelatinous fluid in the sheath of the tendons and bursa mu-
cosa, causing considerable distention pain and uneasiness in
motion the swelling sometimes appears slightly inflamed, the best
application here would be a kneecup, or if I may use the ex-
pression a laced jacket for the knee, made to extend for some
distance both above and below the joint and to fit it accurately
by and thus support a firm and agreeable pressure, the fluid
will be taken up by the absorbents,

To guard against the recurrence of this disease. the patient
should make use of all such means as are calculated
to restore vigour to the constitution and tone to the affec-
ted parts and thereby rendering himself less liable to
the injurious impressions of its exciting cause.
For this purpose he should make use of the cold bath
or in place of it, immersion of the feet & legs into cold water
or sponging them with the same, early every morning, he should
likewise wash his hands, face, head & neck, in cold instead
of warm water daily. Active exercise in the open air,
but not pushed to fatigue is of great service, a strict atten-
tion must be had to clothing, particularly flannel next
the skin

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the skin, this should be worn for most months of the year, and indeed in some cases of delicate persons, the year round; he should also keep his bowels regular & feet dry - it is almost superfluous to observe that during cold wet, disagreeable rainy weather he should be particularly careful not to expose himself - An entire change of occupation & habits of life, or a removal to a more friendly climate has frequently been productive of an entire removal of the Rheumatic predisposition, and, when practicable, should be advised -